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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Attorney Docket No.: 20496-506																																	
Applicants:	Stefan Schwarz, et al.																																		
Application No.:	10/568,265	Conf. No.:	9731																																
Filing Date:	August 18, 2006	Group No.:	3726																																
Title:	INTERNAL HIGH-PRESSURE SHAPING METHOD FOR SHAPING CONICAL TUBES MADE OF METAL																																		
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table> <tr> <td><input type="checkbox"/></td> <td>One month (37 CFR 1.17(a)(1))</td> <td>\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Two months (37 CFR 1.17(a)(2))</td> <td>\$ 490.00</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Three months (37 CFR 1.17(a)(3))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Four months (37 CFR 1.17(a)(4))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Five months (37 CFR 1.17(a)(5))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one half, and the resulting fee is: \$ _____</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td>A check in the amount of the fee is enclosed.</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-3081.</td> <td></td> </tr> </table> <p>I am the</p> <table> <tr> <td><input type="checkbox"/></td> <td>applicant/inventor.</td> </tr> <tr> <td><input type="checkbox"/></td> <td>assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>attorney or agent of record. Registration Number <u>61,189</u>.</td> </tr> <tr> <td><input type="checkbox"/></td> <td>attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____.</td> </tr> </table>				<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ _____	<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$ 490.00	<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ _____	<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$ _____	<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$ _____	<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one half, and the resulting fee is: \$ _____		<input type="checkbox"/>	A check in the amount of the fee is enclosed.		<input checked="" type="checkbox"/>	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-3081.		<input type="checkbox"/>	applicant/inventor.	<input type="checkbox"/>	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).	<input checked="" type="checkbox"/>	attorney or agent of record. Registration Number <u>61,189</u> .	<input type="checkbox"/>	attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____.
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<p>Respectfully submitted,</p> <p><u>/Anita M. Bowles, Ph.D., Reg. No. 61,189/</u> <u>Anita M. Bowles, Ph.D.</u> Agent for the Applicants Proskauer Rose LLP One International Place Boston, MA 02110</p>																																			
Date:	April 9, 2010																																		
Tel. No.:	(617) 526-9727																																		
Fax No.:	(617) 526-9899																																		

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: **Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.** If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.